PTO/SBOS (12-04)
Approved for use through 7/31/2008 CM8 0651-0032
U.S. Petent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE
6 0 collection of Information unless & discriming a unless of this manufacture.

	PATENT	APPI ICA	TION F	et ur	required to 196	ei brog	I DECE	of his	-Thetion	windows	400	-	ONB	control nu	
Under the Paperviote Reduction Act of 1906, no persons are required to respond to a collection of information under PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875 Effective December 8, 2004											Application or Docket Number 09-747737				
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY											OTHER THAN OR SMALL ENTITY				
FOR BASIC FEE		MUMBER FLED		NUMBER EXIRA			RATE (1)		et o			RATE (1)		FEE	
SEARCH FEE		N/A		NIA		_	NVA		150.00			NIA		300.0	
DI CER 1 18(1), (4, or [n])		NA		NIA			NA		\$250			NIA		\$500	
TOTAL CLAIMS		NA NA		IIIA		_	NUA	$\bot$	\$100			AUA		\$200	
()7 OFR ( 18(1)) INDEPENDENT CLAUMS		26 mm x0.				4	X\$ 25	$\perp$		_] ,	OR	X\$50	•		
(37 CFR 1 16(N))		If the specification and		Arandons arease 100			X100	<u>-1</u>			l	X200	•		
PPLICATION EE 7 OFR 1 16(4))	SIZE	theels of pape \$250 (\$125 dditional 50 ( 5 U.S.C. 41(	er, the app for small o theets or to the (1)(6) on	lication ntity) fi action d 37 C	isize fee due or each Shereor See	11									
AULTIPLE DEPENDENT CLASH PRESENT (3) O'R 1 16(1)						J[	+180=				Ī	+360-	7		
If the difference in column 1 is less than zero, enter $oldsymbol{v}$ in column 2.						_	TOTAL				_	TOTAL	7		
,	izo Fee (37 CI	MS NING R RENT Minus  Minus FR 1.16(s))	HIGH NUM PREVIK PAID	BER DUSLY FOR	PRESENT EXTRA	X   X   10   10   10   10   10   10	RATE (1) \$ 25 \$ 180=  DTAL  DOLFEE	T,	ADDI- NONAL EE (B)	OR OR OR	XX	RATE (S)	LLEA	ADDI. TIONAL FEE (8)	
118 1	CLAIMS REMAININ		(Colum HIGHE: NUMBE	ST	(Column 3)	<u></u>					_		7		
Yotal	AFTER		PREVIOU PAID FO	SLY XR	EXTRA		ATE (S)	ΠC	DDI. MAL E (8)		F	CATE (S)	1 1	ADOI- FIONAL FEE (8)	
or cre i. igg; ndependent or cre i. igg;	1.7	Minus	20	<del>}</del>		-	25 .		]	OR	XS	50 .			
oplication Str	Fee (37 CFR	1 !	U			X	00 -			OR ·	X2	00 .	L		
IRST PRESENTATION OF MERTURE DEPENDENT CLAIM (D7 CFR 1 18Q)							80=		$\dashv$	0.5	+3	60=	-		
						TOT				OR	TOTA		<del></del>		

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retein a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments and the amount of time you require to complete this form and/or auggressions for reducing his burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS UDDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.